

## CHAPTER 26 ELDER GROUP HOMES

**321—26.1(231B) Definitions.** The terms in this chapter will have the meanings designated in Iowa Code chapters 231 and 231B and as follows:

*“Assessment”* means the administration of a standardized tool and the use of other procedures to identify existing impairments, situations, and problems which are barriers to a resident’s ability to function and to identify strengths and specific needs.

*“Assistance”* means that help which is provided to a tenant who is able to perform some portion of an activity, but who is unable to complete the activity entirely alone.

*“Care plan”* means the written description of a resident’s needs and capabilities, including by whom, when and how often care and services will be provided.

*“Committee”* means a care review committee established under 321 IAC 9.

*“Condition”* means a provision attached to a new or existing certificate that limits or restricts the scope of the certificate or imposes additional requirements on the certificate.

*“Convenience services”* means those hotel-type services provided for the convenience of a tenant. Convenience services may include meals, transportation, laundry and housekeeping.

*“Exception”* means a variance from a regulation or provision of these rules granted by the department, upon written application by the homeowner.

*“Homelike”* means an environment that promotes the dignity, security and comfort of residents through the provision of personalized care and services to encourage independence, choice and decision making by the tenants.

*“Personal care provider”* means the individual who, in return for reimbursement, assists with the essential activities of daily living which the recipient can perform personally only with difficulty. Personal care may include bathing, personal hygiene, dressing, grooming, and supervision of self-administered medications, but does not include the administration of medications or the services of a registered nurse or licensed practical nurse.

*“Professional health care provider”* means an individual licensed as a medical doctor, a doctor of osteopathic medicine, a physician assistant, a registered nurse, or a licensed practical nurse.

*“Resident manager”* means the homeowner or an employee of a nonprofit corporation who lives in the home and is directly responsible for the care of tenants on a day-to-day basis. The resident manager may or may not be a personal care provider.

*“Self-administered medications”* means the act of a tenant placing a medication in or on the tenant’s own body without assistance.

*“Supervision of self-administered medications”* means the verbal reminder or guidance in the identification of the medication, the times and manner of administration. Supervision does not include the placing of the medication internally or externally on the tenant’s body.

*“Tenant”* means any person who is receiving room, board, personal care or convenience services for compensation in an elder group home (EGH) on a 24-hour basis.

**321—26.2(231B) Application.** Any person or nonprofit corporation owning a single-family residence has the right to apply to the Iowa department of elder affairs for EGH certification for that residence.

### **321—26.3(231B) Certification process.**

**26.3(1)** The department shall review the application for completion and compliance with all rules of this chapter and shall notify the homeowner of application status within five working days of receipt of the application.

**26.3(2)** Upon determination that an application is complete and in compliance, the department shall notify the state fire marshal.

**26.3(3)** The department or its designee(s) shall determine whether or not the proposed EGH meets applicable administrative rules contained in 321—Chapter 26 and, if new construction, all applicable local housing or state building codes.

**26.3(4)** The department shall notify the homeowner in writing of certification approval or denial within five working days of receipt of documentation of inspections completion.

**26.3(5)** The department shall notify within five working days the appropriate city council or county board of supervisors and AAA that an EGH has been certified and placed on the registry maintained by the department.

**321—26.4(231B) Tenant admission requirements.**

**26.4(1)** Resident managers may only admit or continue to care for tenants whose service needs do not require a level of care that exceeds the provision of personal care as defined in Iowa Code section 231B.1.

**26.4(2)** The resident manager shall notify the care review committee within one week of acceptance of the first tenant.

**26.4(3)** A tenant will be accepted for residence only if a bedroom is available to the tenant from which the unaided tenant is able to travel a normal path to safety.

**321—26.5(231B) Care plan required.**

**26.5(1)** A care plan will be developed at admission for each tenant by a case management project for frail elderly (CMPFE) multidisciplinary team or, where CMPFE is not available, by a professional health care provider selected by the tenant, and in cooperation with the tenant.

**26.5(2)** The care plan will be used on an assessment of tenant functional abilities.

**26.5(3)** The care plan shall indicate, at a minimum, the client's needs and requests for assistance, services and care to be provided, and the provider(s).

**26.5(4)** The tenant's care plan shall be reviewed for appropriateness at least within 30 days prior to recertification of the EGH and on client or resident manager request.

**321—26.6(231B) Exceptions.**

**26.6(1) *Level of care exceptions.*** The department shall establish a process:

*a.* To grant on a time-limited basis an exception to this chapter for a tenant who temporarily needs additional service or hospice care;

*b.* To monitor the appropriateness of the exception; and

*c.* To keep exceptions to a minimum.

**26.6(2) *Criteria for level of care exception.*** The department may grant an exception if the resident manager proves by clear and convincing evidence the following criteria are met:

*a.* It is the informed choice of the tenant to remain in the home; and

*b.* The resident manager is able to provide appropriate care to the tenant in addition to the care of the other tenants; or additional staff is available and obtained to meet the tenant's care needs; and

*c.* The exception will not jeopardize the care, health, safety or welfare of the tenants.

**321—26.7(231B) Care review committees.** Care review committees for EGHs shall be governed by 321—Chapter 9 unless otherwise required in this chapter.

**26.7(1) *Committee placement.*** A care review committee shall be established by the department within each city or county with EGH(s) certified in accordance with this chapter.

**26.7(2) *Committee ratio.*** The department shall establish care review committees at the ratio of one committee for no more than five EGHs.

**26.7(3) *Committee visitations.*** The committee shall visit each EGH assigned to it at a minimum of once a year and within one month following the admission of the first tenant to the EGH.

**321—26.8(231B) Qualifications for EGH personnel.**

**26.8(1) *Proof of training.*** The homeowner shall maintain for review, proof of training of EGH staff required by these rules.

**26.8(2) *Personal care providers.*** Persons providing personal care shall have completed at a minimum a home health aide training program that meets the requirements and criteria established in 641—Chapter 80.

**26.8(3) *Resident manager.***

*a.* The resident manager shall be 18 years of age or older, of sound mind, essentially capable of physical self-care, and shall reside in the EGH as a primary residence; and

*b.* The resident manager shall sign an affidavit attesting to not being a substance abuser or to having a record of dependent adult or domestic abuse. Any person refusing to sign such an affidavit or subsequently found to have lied on said affidavit shall not serve as a resident manager.

### **321—26.9(231B) Facility standards.**

**26.9(1)** The EGH shall be safe, sanitary, well-ventilated, properly lighted and heated and, if constructed or substantially remodeled after January 1, 1994, shall comply with all applicable local housing ordinances for family residences and with 661—5.625(100,231B).

**26.9(2)** If the structure existed on or prior to January 1, 1994, the EGH shall meet the fire safety rule promulgated by the state fire marshal division for this special classification and the following standards:

*a.* General.

(1) The home and furnishings shall be clean and in good repair;

(2) Stairways shall have handrails of a circumference, length, texture, strength and stability that can reasonably be expected to provide tenant support;

(3) A functioning light shall be provided in each room, stairway, and exit; incandescent light bulbs shall be protected with appropriate covers;

(4) The yard, fire exits and exterior steps shall be accessible and appropriate to the condition of the tenants;

(5) There shall be at least 150 square feet of common living space and sufficient furniture in the home to accommodate the recreational and socialization needs of all the tenants at one time; common space shall not be located in the basement or garage, unless such space was constructed for that purpose. Additional common living space may be required if wheelchairs are to be accommodated;

(6) Interior and exterior doorways used by residents must be wide enough to accommodate wheelchairs and walkers if persons with impaired mobility are in residence;

(7) Hot and cold water at each tub, shower, and sink shall be in sufficient supply to meet the needs of the residents;

(8) Grab bars will be present for each toilet, tub and shower; access to toilet and bathing facilities shall be barrier-free; toilet and bathing facilities shall provide individual privacy;

(9) A telephone will be available and accessible for tenants' use in a reasonable accommodation for privacy for incoming and outgoing calls.

*b.* Sanitation.

(1) A public water supply shall be utilized if available; if a nonmunicipal water source is used, the homeowner must show documentation from the state laboratory that the water supply is potable;

(2) Septic tanks or other nonmunicipal sewage disposal systems shall be in good working order;

(3) Garbage and refuse shall be suitably stored;

(4) If laundry service is provided, soiled linens and clothing shall be stored in containers in an area separate from food storage, kitchen and dining areas;

(5) Sanitation for household pets and other domestic animals shall be adequate to prevent health and safety hazards;

(6) There will be adequate control of insects and rodents;

(7) Reasonable and prudent precautions for infection control will be used in personal care;

(8) There shall be at least one toilet and one sink for each four occupants, and at least one tub or shower for each six household occupants (including tenants, resident manager, and resident manager's

family) with a minimum of one sink and toilet on each floor occupied by tenants; a sink shall be located near each toilet.

c. Bedrooms shall:

- (1) Have a door that opens directly to a hallway or common use area without passage through another bedroom or common bathroom;
- (2) Be adequately ventilated, heated and lighted;
- (3) Have at least 70 square feet of usable floor space, excluding any area where a sloped ceiling does not allow a person to stand upright;
- (4) Provide individual privacy and be occupied by one tenant, unless freely agreed to by the tenants in the lease;
- (5) Resident managers, their family members and convenience service providers and personal care providers shall not use as bedrooms areas that are designated as living areas or as tenant bedrooms;
- (6) Be on ground level for tenants with impaired mobility;
- (7) Be in close enough proximity to resident manager to alert resident manager to nighttime needs or emergencies, or shall be equipped with a call system.

d. Safety.

- (1) All combustion appliances shall be used and maintained properly and be inspected annually by a qualified technician for carbon monoxide emissions;
- (2) Extension cord wiring shall not be used in place of permanent wiring.

**321—26.10(231B) Revocation of certification.**

**26.10(1) Condition for revocation.** Upon determination that an EGH is no longer in compliance with these rules, the department shall terminate the EGH certification.

**26.10(2) Notification of revocation.** The department shall notify in writing within three working days the city council or the county board of supervisors, the AAA and the homeowner that EGH certification has been terminated.

**26.10(3) Notification of tenants.** The department shall notify the tenants of the former EGH within 24 hours that certification has been revoked and that the AAA is available for information and referral regarding alternative services and housing options.

**321—26.11(231B) Fees.** Fees to cover program administration shall be established by the department. All fees shall be paid at the time of the request and are nonrefundable. Checks should be made out to the Iowa Department of Elder Affairs.

**321—26.12(231B) Certification required.** Any facility that meets the definition of an EGH as defined in Iowa Code section 231B.1(4) must be certified by the department, excepting those facilities that are certified or licensed under Iowa Code chapter 135C.

These rules are intended to implement Iowa Code chapter 231B.

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